

**Fee Calculation Sheet  
(For Use With Form PTO-875)**

11/15/87 U4  
APPLICANT

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1			1				S1					
2		1						S2					
3			1					S3					
4				1				S4					
5					1			S5					
6						1		S6					
7							1	S7					
8								S8					
9								S9					
10								S10					
11								S11					
12								S12					
13								S13					
14								S14					
15								S15					
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42								S42					
43								S43					
44								S44					
45								S45					
46								S46					
47								S47					
48								S48					
49								S49					
50								S50					
TOTAL IND.	2		2		2			TOTAL IND.					
TOTAL DEP.	13	←	43	←	43	←		TOTAL DEP.	↓	↓	↓	↓	↓
TOTAL CLAIMS	35	████	45	████				TOTAL CLAIMS	████	████	████	████	████

Best Available Copy